

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective December 8, 2004

Application or Docket Number

**10/533741**

**CLAIMS AS FILED - PART I**

|                                  |   | (Column 1)   | (Column 2)                             |
|----------------------------------|---|--|--|
| <b>U.S. NATIONAL STAGE FEES</b>  |   |  |  |
| BASIC FEE                        |   | SMALL ENT. = \$ 150  | LARGE ENT. = \$ 300                    |
| EXAMINATION FEE                  |   | Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100                     | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE                       |   | U.S. & ISA = \$ 50 / \$ 100<br>ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS.         |   | minus 100 =  | / 50 =                                 |
| TOTAL CHARGEABLE CLAIMS          | 7 | minus 20 =   | .                                      |
| INDEPENDENT CLAIMS               | 1 | minus 3 =  | .                                      |
| MULTIPLE DEPENDENT CLAIM PRESENT |   |  | <input type="checkbox"/>               |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

|  |             | (Column 1)                       | (Column 2) | (Column 3)                                       |
|--|-------------|----------------------------------|------------|--|
| AMENDMENT A                                    |             | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA |
|  | Total       | 7                                | Minus      | ** 20 =  |
|  | Independent | 1                                | Minus      | *** 3 =  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |                                  |            | <input type="checkbox"/>                         |

|  |             | (Column 1)                       | (Column 2) | (Column 3)                                       |
|--|-------------|----------------------------------|------------|--|
| AMENDMENT B                                    |             | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA |
|  | Total       | 7                                | Minus      | ** =   |
|  | Independent | 1                                | Minus      | *** =  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |                                  |            | <input type="checkbox"/>                         |

|            |           | SMALL ENTITY TYPE | OTHER THAN SMALL ENTITY |
|------------|-----------|-------------------|-------------------------|
| OR         | BASIC FEE |                   | RATE                    |
|            |           |                   | 300                     |
| OR         | EXAM. FEE |                   | 200                     |
|            |           |                   | 400                     |
| X \$ 125 = |           |                   | X \$ 250 =              |
| X \$ 25 =  |           |                   | X \$ 50 =               |
| X \$ 100 = |           |                   | X \$ 200 =              |
| +\$ 180 =  |           |                   | +\$ 360 =               |
| TOTAL      |           |                   | TOTAL                   |
|            |           |                   | 300                     |
|            |           |                   | 1030                    |

|    |                  | SMALL ENTITY   | OTHER THAN SMALL ENTITY |
|----|------------------|----------------|-------------------------|
| OR | RATE             | ADDITIONAL FEE | RATE                    |
|    | X \$ 50 =        |                |                         |
| OR | X \$ 200 =       |                |                         |
| OR | +\$ 360 =        |                |                         |
| OR | TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE        |

|    |                  | RATE | ADDITIONAL FEE   |
|----|------------------|------|------------------|
| OR | X \$ 50 =        |      |                  |
| OR | X \$ 200 =       |      |                  |
| OR | +\$ 360 =        |      |                  |
| OR | TOTAL ADDIT. FEE |      | TOTAL ADDIT. FEE |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.